



Medical Coverage for Parents or Caregivers of Children

GENERAL REQUIREMENTS

This program is available to families with children. There must be children in the home under the age of 19. This program may cover the children and their parents who live together. Or, if the children are living with other relatives or legal guardians this program may cover the children and the other relatives or legal guardians.

To be eligible, a household member must be a Kansas resident and a U.S. citizen or an eligible non-citizen. Verification of citizenship and identity or immigration status is required. See the [Citizenship and Identity Requirements](#) fact sheet for more information.

RESOURCES

No resource test is applicable.

INCOME

The earned and unearned income of the child and the adults they are living with must be considered. This includes wages, unemployment benefits, Social Security (except SSI), VA benefits, and child support to name a few.

The application should list each person who is living in the home. The eligibility worker will decide who has to be counted in the household.

INCOME STANDARDS

The income standard varies depending on the family size. Your family size is usually determined by your income tax unit. Your unborn child is also included. Your family size may also include your parents if you are a minor or they claim you as a tax dependent.

If the family income exceeds the maximum income limit for this program, the children can then be considered for coverage under the children's medical program (See fact sheet for additional [Medical Coverage for Children](#) information.)

Persons in Plan	Monthly Income
1	\$0 - \$405
2	\$405.01-\$546
3	\$546.01-\$688
4	\$688.01-\$830

*Add \$142.00 for each additional person

COOPERATION WITH CHILD SUPPORT ENFORCEMENT (CSE)

Parents and caretakers approved for the family medical program are required to cooperate with Child Support Services department of DCF to obtain child support for the children in the home. If you are afraid to seek child support because there is a fear that the absent parent will harm you or the child, you should tell your eligibility worker when you apply.

HOW TO APPLY

To apply for medical coverage for children, pregnant women, or families with children, use any of the following choices:

- [Apply online](#)
- Call the KanCare Clearinghouse at 1-800-792-4884 to request an application.
- Download an English or Spanish application to print [Apply for KanCare](#)